

*JF/N*

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of)
ANDO et al.) Art Unit 3715
Application Number: 10/728,904)
Filed: December 8, 2003)
For: INFORMATION MANAGEMENT SERVER AND) Examiner:
INFORMATION DISTRIBUTION SYSTEM) Timothy A. Musselman
Attorney Docket No. GOTO.0008)

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

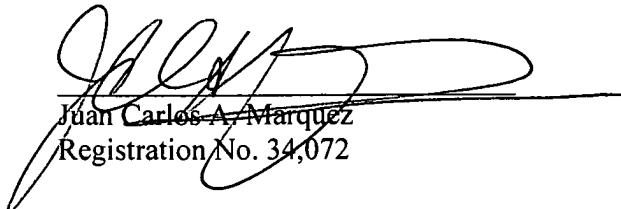
FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	8	8	(Over 20)	x \$52	0
Independent Claims	3	3	(Over 3)	x \$220	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$390	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28).				x ½	
			TOTAL		\$0

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Response and Amendment to Office Action
(without claim amendments) | <input type="checkbox"/> Petition for Extension of Time __ month |
| <input type="checkbox"/> Substitute Spec. & marked-up copy | <input type="checkbox"/> Information Disclosure Statement |
| <input type="checkbox"/> Preliminary Amendment | <input type="checkbox"/> __ sheets of replacement drawings |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> RCE |

- Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____.
- Credit card information for \$_____ to cover the _____ fee is enclosed.
- The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit Account Number 12-0555**.

Respectfully submitted,



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